

Date.....

Permit No.....

TOWN OF ACTON

APPLICATION FOR PERMIT TO CONSTRUCT WITHIN A PUBLIC WAY

This application must be submitted not less than five (5) days prior to any Construction within a public way.

Notice 24 hours in advance of any construction must be given to the Town Engineer.

1. Permittee: SPAM Address: 36 Mill St. Uxbridge
- 1A. Telephone #: 978-534-3504
2. Location of Proposed Construction: 118 Central St
3. Purpose of Construction: Gas Leak Repair
4. Length of Cut: 6
5. Width of Cut: 4
6. Width of Existing Pavement:
7. Type of Existing Roadway Surface: Type of Curb:
8. Type of Existing Sidewalk Surface: Type of Shoulder:
9. Date of Street Opening: From To
10. For Work Involving Excavations: Dig Safe Number 2002-380-9432

I, the undersigned, hereby declare that I have read and agree to the Town of Acton Specifications for Regulating Construction with Public Ways dated January 8, 1991. I have deposited the required bond with the Town of Acton, and I covenant and agree that the Town may deduct from this amount the cost of repairs to the road surface, curbs, shoulders, walls or other features within the right-of-way including replacing bounds if not completed by me to the satisfaction of the Town Engineer within the specified time.

Special Instructions:

Signature of Applicant Bernadette

Plans 1967 County Layout - Road is bounded - see attached plan - Do not
All work is proposed w/ the pavement

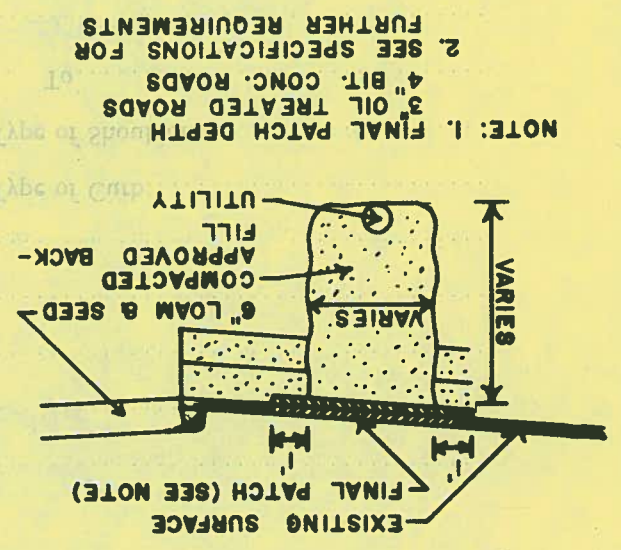
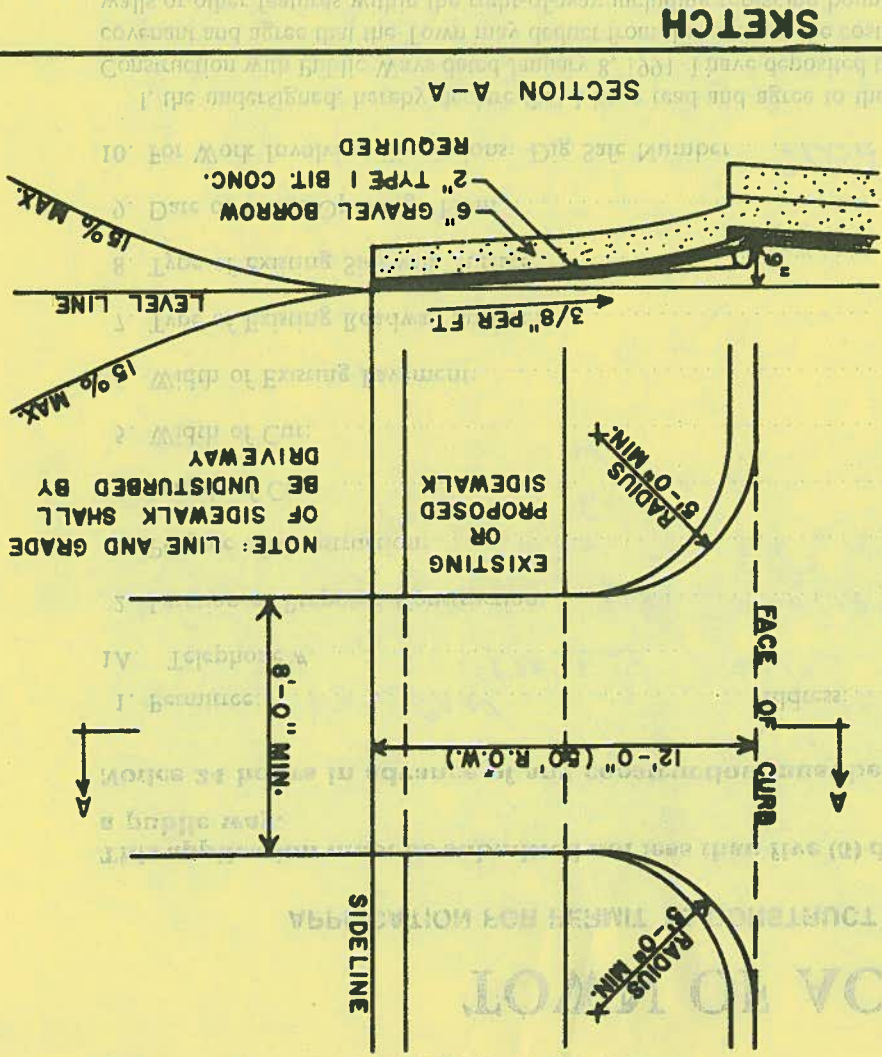
Permit Issued: Date 10/31/02 By: g/f

Application Denied: Date By:

Work Inspected and Approved: Date By:

(over)

TOWN OF ACTON TRENCH DETAIL FEB. 1969 NO SCALE



NOTE: 1. FINAL PATCH DEPTH
2. SEE SPECIFICATIONS FOR
3. OIL TREATED ROADS
4. BIT. CONC. ROADS
FURTHER REQUIREMENTS

SKETCH

SECTION A-A

Date.....Sept 17 2002.....

Permit No.....

TOWN OF ACTON

APPLICATION FOR PERMIT TO CONSTRUCT WITHIN A PUBLIC WAY

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Notice 24 hours in advance of any construction must be given to the Town Engineer.

1. Permittee: Kay SPAN Address: 36 mill ST - Leominster
1A. Telephone #: 978-534-3504
2. Location of Proposed Construction: 418 Central ST
3. Purpose of Construction: Gas Leak Repair
4. Length of Cut: 6
5. Width of Cut: 4
6. Width of Existing Pavement:
7. Type of Existing Roadway Surface: Type of Curb:
8. Type of Existing Sidewalk Surface: Type of Shoulder:
9. Date of Street Opening: From To
10. For Work Involving Excavations: Dig Safe Number 2002-380-9432

I, the undersigned, hereby declare that I have read and agree to the Town of Acton Specifications for Regulating Construction with Public Ways dated January 8, 1991. I have deposited the required bond with the Town of Acton, and I covenant and agree that the Town may deduct from this amount the cost of repairs to the road surface, curbs, shoulders, walls or other features within the right-of-way including replacing bounds if not completed by me to the satisfaction of the Town Engineer within the specified time.

Special Instructions:

Signature of Applicant Bernard Lopez

Plans 1967 County Layout - Road bounded - see attached plan - Do not
All work is proposed w/k the pavement

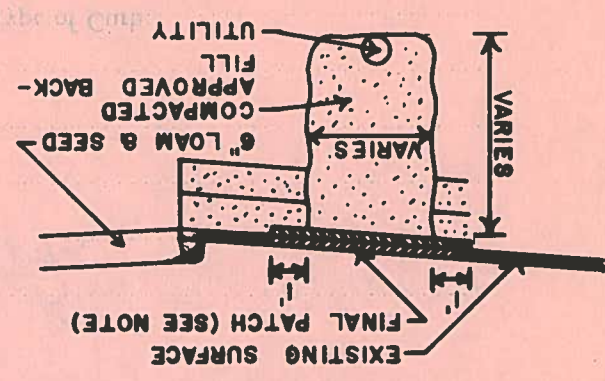
Permit Issued: Date 10/3/02 By: G. L.

Application Denied: Date By:

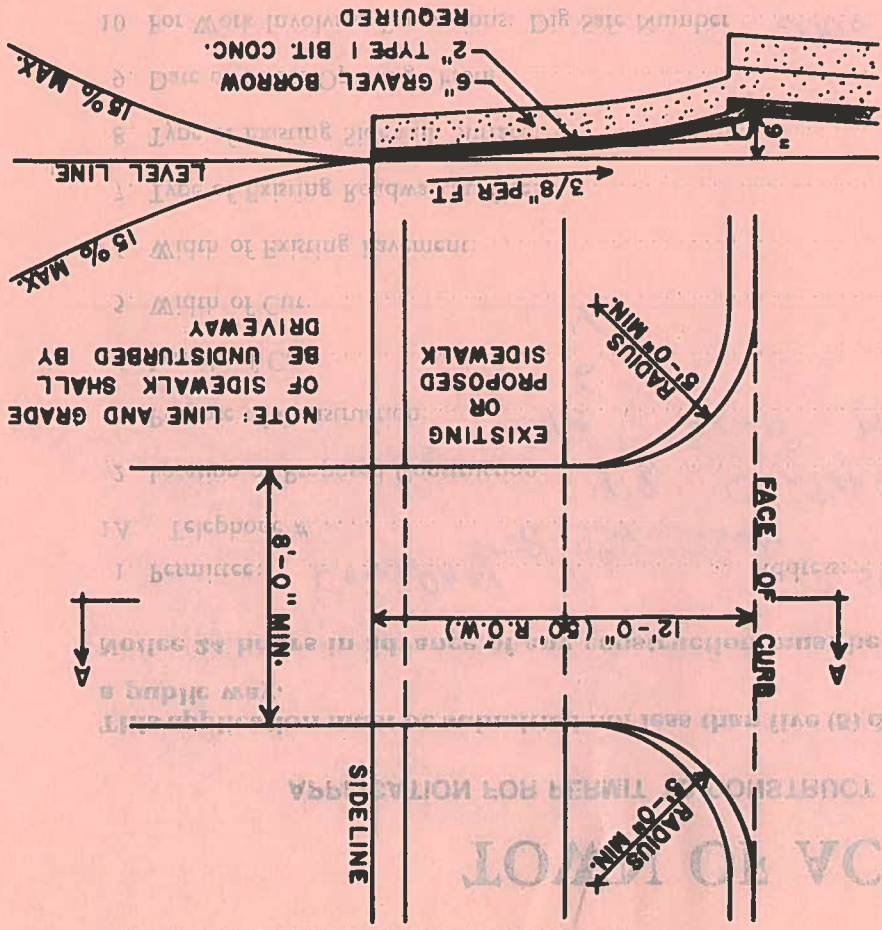
Work Inspected and Approved: Date By:

(over)

TOWN OF ACTON TYPICAL DRIVEWAY 8 TRENCH DETAIL FEB. 1969 NO SCALE



NOTE: 1. FINAL PATCH DEPTH
4\"/>



SKETCH

Work suggested and approved: Date: _____
 Approved: Date: _____
 Permit issued: Date: _____



LEAK INVESTIGATION REPORT

Sept 24 2:30
2002-380-9432

(P)

DATE: 5-22-02 PREMARKED DATE: 5-22-02 PROJECT #
REPORTED BY: Customer TIME TAKEN: 1333 LEAK # 154473
ADDRESS: 418 Central St CITY / TOWN: Acton JOB # 84641

LEAK CLASSIFICATION	
Grade I	<input type="checkbox"/>
Grade II	<input checked="" type="checkbox"/>
Grade III	<input type="checkbox"/>

LEAK STAND-BY	
Yes	<input type="checkbox"/>
No	<input checked="" type="checkbox"/>

PREMISE CONDITION REPORT	
Yes	<input checked="" type="checkbox"/>
No	<input type="checkbox"/>

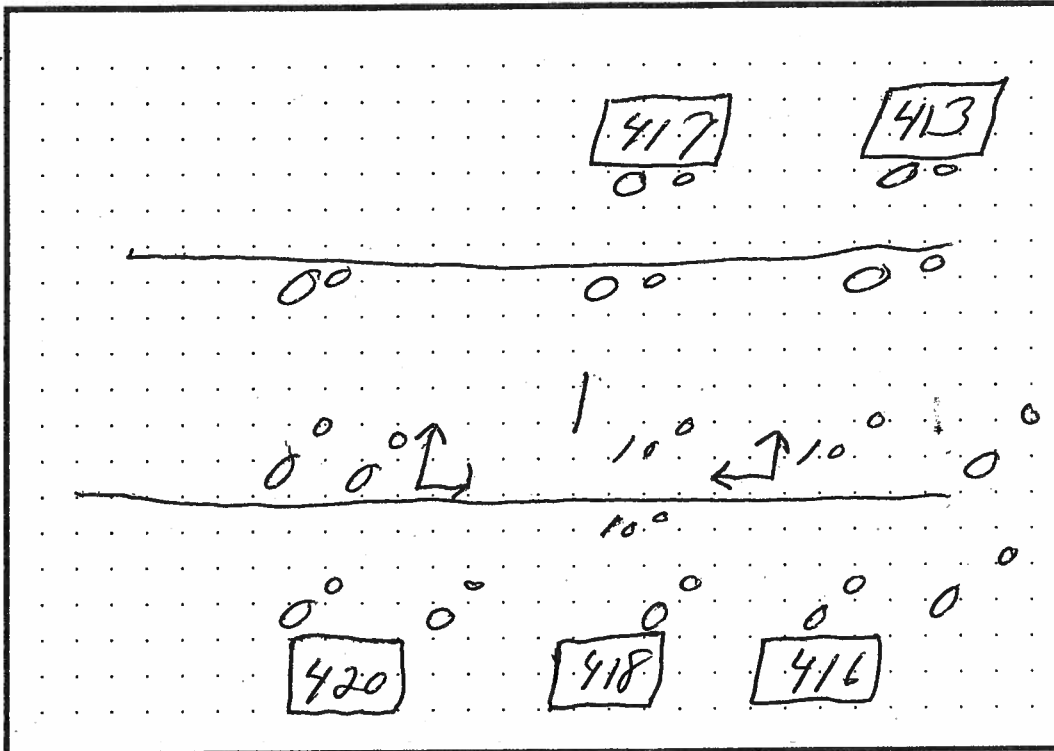
SURVEY TYPE /	PROJECT #
Public	136
Employee	136
Winter Patrol	146
Summer F.I.	140
Walking	144
Re-Check	132
C.I. encroachment	128
Prepave	134
Special	138
Contractor	142

TYPE OF AREA	
Rural	<input type="checkbox"/>
Residential	<input checked="" type="checkbox"/>
Urban	<input type="checkbox"/>

PRESSURE	
High	<input checked="" type="checkbox"/>
Intermediate	<input type="checkbox"/>
Low	<input type="checkbox"/>

ODOR PRESENT	
Yes	<input checked="" type="checkbox"/>
No	<input type="checkbox"/>

Leak Sketch



CGI TEST	
Positive	<u>10</u> % <input checked="" type="checkbox"/>
Negative	<input type="checkbox"/>

LEAK APPEARS TO BE ON	
Main	<input checked="" type="checkbox"/>
Service	<input checked="" type="checkbox"/>
Drip	<input type="checkbox"/>
Curb Valve	<input type="checkbox"/>
Main Valve	<input type="checkbox"/>
Other	<input type="checkbox"/>

METHOD OF TESTS	
Portable F.I.	<input checked="" type="checkbox"/>
Mobile F.I.	<input checked="" type="checkbox"/>
CGI	<input checked="" type="checkbox"/>
Selected Test	<input type="checkbox"/>
Other	<input type="checkbox"/>

COMMENTS: 10' gas gate Box and old patch in street

CONTACTED: ☒ Y ☒ N
CREW LEADER

SUPERVISOR ☒ Y ☒ N

Walter M. McLink
COMPANY REPRESENTATIVE

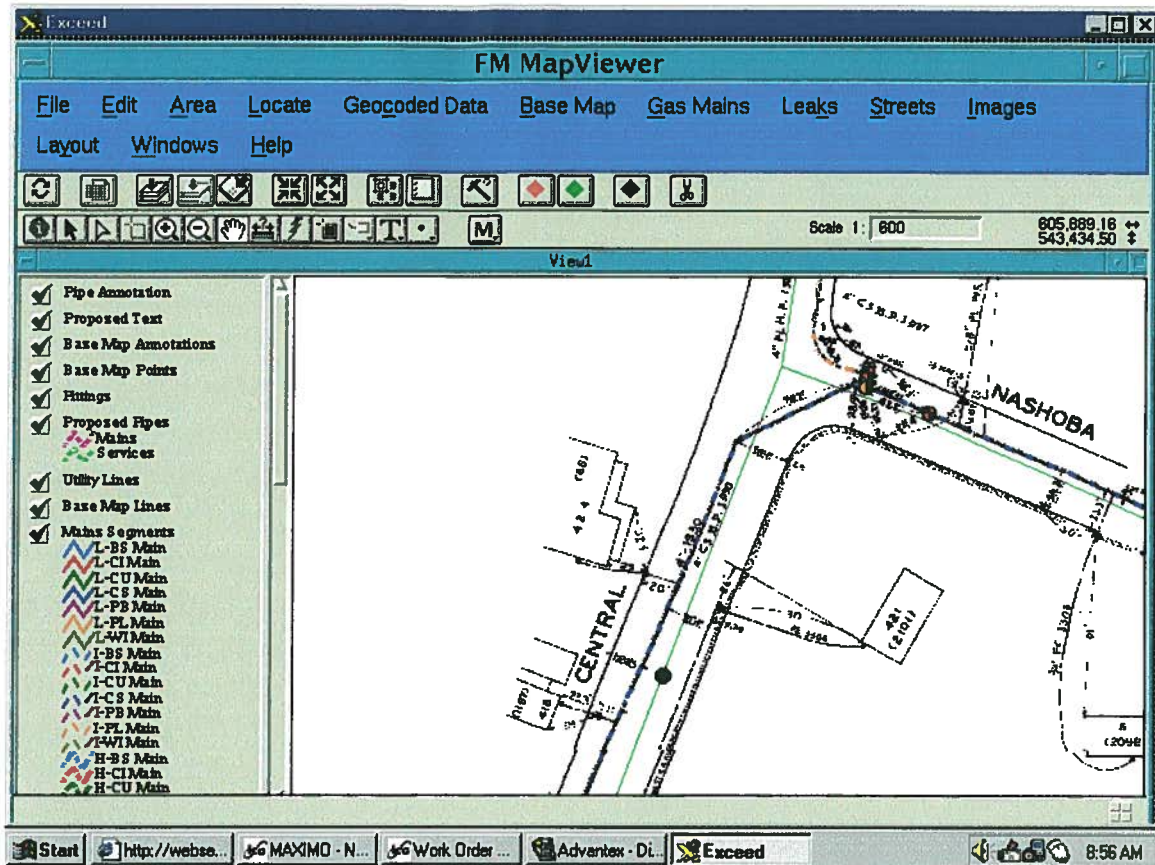
22902
EMPLOYEE #

COVER	
Asphalt	<input checked="" type="checkbox"/>
Concrete	<input type="checkbox"/>
Brick	<input type="checkbox"/>
Gravel	<input type="checkbox"/>
Soil	<input type="checkbox"/>
Other	<input type="checkbox"/>

GAS DETECTED IN	
Atmosphere	<input type="checkbox"/>
Bar Hole	<input checked="" type="checkbox"/>
Manhole	<input type="checkbox"/>
Valve Box	<input checked="" type="checkbox"/>
Main Valve	<input type="checkbox"/>
Curb Valve	<input type="checkbox"/>
Thru Foundation	<input type="checkbox"/>

CONSULTANT REPRESENTATIVE

COMPANY



418 Central

